

## **City of Weslaco**

"The City on the Grow"



David Suarez, Mayor
Letty Lopez, Mayor Pro-Tem, District 5
Leo Muñoz, Commissioner, District 1
Greg Kerr, Commissioner, District 2
Jose "J.P." Rodriguez, Commissioner, District 3
Adrian Farias, Commissioner, District 4
Josh Pedraza, Commissioner, District 6

Mike R. Perez, City Manager

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March 26, 2020

## **WORK SAFE PLAN**

Businesses and organizations identified by the Department of Homeland Security, through the National Cybersecurity and Infrastructure Agency, as critical to the nation's infrastructure may continue to operate. However, any business or organization that continues to operate **must implement and enforce distancing**, sanitation, and hygiene practices.

To comply with Emergency Order No. 2020-04, all operating businesses and organizations must submit a **Work Safe Plan** to the City of Weslaco by email to <u>oemworkplan@weslacotx.gov</u> within 48 hours of opening after 11:59 pm, March 24, 2020.

As owner, operator, or representative or	a dusiness
or organization that will continue to operate, I certify that:	
To the maximum extent possible, ensure that all customers and all employees stay at least six feet away from each all times.	ch other at
Additional Comments:	
To the maximum extent possible, minimize employees on site, minimize in person meetings, and allow employe from home.	es to work
Additional Comments:	
Provide sanitation supplies accessible and available to all employees such as disinfectants, hand sanitizer comprileast 60% alcohol, and soap.	ised of at
Additional Comments:	
Provide hand sanitation at all entrances for customers.	
Additional Comments:	

If an employee reports possible exposure, or reports or shows symptoms of COVID-19, send the employee home and sanitize the employee's work area.  Additional Comments:
☐ Mandate that employees clean and sanitize work areas, including vehicles, at least twice during the workday.
Additional Comments:
Perform thorough cleaning/sanitation of all common areas and surface areas at least once during the workday.
Additional Comments:
Prior to beginning work, screen all employees and send home any employee who:  Shows signs or symptoms of a respiratory infection, such as a cough, shortness of breath, sore throat, and low-grade fever, or  In the previous 14 days has had contact with someone with a confirmed diagnosis of COVID-19; is under
investigation for COVID-19; or is ill with a respiratory illness.  Additional Comments:
Date:
BUSINESS NAME/TRADE NAME
Business/Organization Name Address:
OWNER/OPERATOR/REPRESENTATIVE'S SIGNATURE
Name: Title:
Phone Number:

Work Safe Plans should be submitted via email to <a href="mailto:oemworkplan@weslacotx.gov">oemworkplan@weslacotx.gov</a>

## Work Safe Plan Guidelines

- Name of company, contact person, and phone number;
- How many employees will be at your facility per shift;
- What are your hours of operation and specific shift hours;
- What will you be giving your employees to show to Law Enforcement for travel to and from work;
- How you will ensure that all customers and all employees will stay at least 6 feet away from each other at all times;
- How you will minimize employees on site, minimize in person meetings, and if you will be allowing employees to work from home;
- Where are your sanitation supplies such as disinfectants, hand sanitizer comprised of at least 60% alcohol, and soap? Is it accessible to the employees?;
- Locations of hand sanitizers for customers:
- What is your procedure if an employee reports a possible exposure, reports or shows symptoms of Covid-19? Please include that they will be sent home after sanitizing their work area;
- Show us your plan for mandating employees to clean and sanitize their work areas, including vehicles, at least twice daily;
- Show us your plan on performing a thorough cleaning/sanitation of all common areas and surface areas at least once during the workday;
- Show us your plan on how you're going to begin each workday by screening all employees. Be sure to include the following criteria:
  - Signs or symptoms of a respiratory infection, such as a cough, shortness of breath, sore throat, and low-grade fever or
  - In the previous 14 days has had contact with someone with confirmed diagnosis Covid-19, is under investigation, or ill with a respiratory illness.